

## **REMARKS**

This application has been carefully reviewed in light of the Office Action dated November 15, 2005. Claims 33, 36, 37, 39, 40, 43, and 44 have been amended. New claims 47-49 have been presented. Claims 33-46 are currently pending in the application.

Claims 33-39 have been rejected under 35 U.S.C. 103(a) as being unpatentable over U.S. Patent 6,018,719 (Coli et al.) in view of U.S. Patent 6,108,665 (Bair et al.)

Claims 40-46 have been rejected under 35 U.S.C. 103(a) as being unpatentable over Coli et al. in view of Bair et al. and further in view of U.S. Patent 6,104,631 (Teagarden et al.) These rejections are respectfully traversed in light of the present amendments.

Independent claims 33 and 40 have been amended to more particularly point out the distinctions between the present invention and the prior art. In particular, the independent claims recite, among other elements (1) using the computer to solicit from the user a subset of test results selected from the set of possible results for that test; and (2) creating a summary which simultaneously displays the subsets of test results for all of the selected tests for use by a health care provider in selecting a treatment track for treatment of the selected medical condition based on the test results. No new matter is contained in these amendments.

These claims point out with more specificity the nature of the present system as a computer-implemented disease management system in which all aspects of the treatment of a particular disease are coordinated, in contrast to the prior art systems which are directed to (1) electronic records management (2) systems which attempt to supplement or replace human judgment with stored data and algorithms in the diagnosis of disease.

In particular, when the computer solicits a selected subset of test results, this performs an important filtering function by focusing the health care provider's attention on clinically relevant test result parameters, rather than all possible raw data from the test. An example of a data input screen which solicits a selected subset of results for a particular test (e.g. esophageal manometry) is shown in Figure 9.

Another important aspect of the present system is the summary of test results. While other systems exist that can display test results, the summary of the present invention displays the selected results of several disparate tests so they are simultaneously visible. For example, Figures 15A and 15B illustrate an example of a summary which presents the selected results from three different tests. These tests are normally performed by different personnel at different physical locations. By having all of these focused results presented together, the physician or health care provider has a comprehensive "snapshot" of all of the diagnostic procedures performed, and can provide far better results in terms of diagnosis and treatment track selection.

Coli et al., Bair et al., or Teagarden are not believed, alone or in combination, to disclose or suggest independent claims 33 or 40 as amended. Accordingly, the rejection should be withdrawn. Claims 34-39 and 41-49 depend from claims 33 or 40 and are thus believed to be allowable as well.

Applicant has chosen to add new claims 47-49. Each of these claims depends directly or indirectly from claims 33 or 40, and no new matter is contained therein.

In view of the above, it is submitted that the claims are in condition for allowance. Reconsideration of the objections and rejections is requested. Allowance of claims 33-49 at an early date is solicited.

If any fees are due in connection with this paper, the Director is authorized to charge them to Deposit Account No. 01-0265.

Respectfully submitted,  
/Jonathan Hines/  
Jonathan M. Hines  
Registration No. 44,764

ADAMS EVANS P.A.  
2180 Two Wachovia Center  
Charlotte, North Carolina 28282  
Tel. 704-375-9249  
Fax: 704-375-0729  
e-mail: [jmh@adamspat.com](mailto:jmh@adamspat.com)  
File No. 2824/1